

2012 PARTICIPANT REGISTRATION FORM

Name:					
Gender:	☐ Male	☐ Female	Birth Date:	Age:	
E-Mail:					
Phone Number:					
Address:					
Race Registration (March 1 – April 6) : ☐ 5k (\$30) ☐ 10k (\$40) ☐ Kid's Fun Run (\$20) ☐ 5k9 (\$30)					
Race Day Registration (April 7): ☐ 5k (\$35) ☐ 10k (\$45) ☐ Kid's Fun Run (\$25) ☐ 5k9 (\$35)					
Muddy Trails T-Shirt (<i>adult</i>) □Small □ Medium □ Large □ X Large □ 2X Large Little Muddy T-Shirt (youth) □Small □ Medium □ Large					
Emergen	cy Contact	Name :		Number:	
How did you hear about this event?					
How many years have you participated in this event? ☐ First Year ☐ 1 ☐ 2 ☐ 3 ☐ 4					
In consideration of being allowed to participate in any way in any program, activity or event, (referred to herein as the "Program") sponsored by, performed by, or in any way involving The Woodlands Township, I, as Participant, or if Participant is a minor, as parent or guardian of the minor Participant (herein referred to as "1") and intending to be legally bound do hereby acknowledge and agree to the following: 1. I hereby waive, discharge, and release any and all rights and claims for damages whether based upon negligence or any other theory of law, which I, or my child, heirs, agents, representatives, or assigns may have against The Woodlands Township, and its affiliates, agents, representatives, assigns, or successors including, without limitation; any officers, directors, shareholders, agents and/or employees of or associated with The Woodlands Township, The Woodlands Land Development Company, the municipalities or counties in or through which the programs or events take place or are conducted, as well as any other person, entity or sponsor connected with the Program and any of their affiliates, agents, representatives, assigns, successors, officers, directors, shareholders, and employees, for any and all injuries or damages which I, or my child, may suffer while taking part in the Program. 2. I hereby assume any and all of the foregoing risks resulting from my, or my child's, participation in the Program and accept all personal responsibility for any resulting damage including, but not limited to, injury, permanent disability or death 3. I hereby assume any and all of the foregoing risks resulting from my, or my child's, participation in the Program and accept all personal responsibility for any resulting damage including, but not limited to, injury, permanent disability or death 3. I hereby assume any and all of the foregoing risks resulting from my, or my child, sparticipation in the Program. 5. I have read and fully understood this Waiver and Release. FOR PARENTS OF PARTICIPANTS UNDER THE AGE OF					
Printed Name of Participant					
Signature	of Participant	, Parent or Legal (Guardian	Date	
Payment	: □ Casl	h □ Check	☐ Credit Card #		Ехр
Please make check payable to The Woodlands Township					